

APPLICATION FOR UNITED STATES PATENT DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; that

I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SERVICE PROCESSING SYSTEM AND METHOD

described and claimed in the specification:

Check one

*a. ☒ attached hereto.

b. ☐ filed on _____ as Application Serial No. _____ and
amended on _____
(if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56.

Under Title 35 U.S. Code § 119, the priority benefits of the following foreign application(s) and/or United States provisional application(s) filed within one year prior to this application are hereby claimed:

Japanese Patent Application No. 2003-053292, filed on February 28, 2003

The following application(s) for patent or inventor's certificate on this invention were filed in countries foreign to the United States of America either (a) more than one year prior to this application, or (b) before the filing date of the above-named foreign priority application(s) and/or United States provisional application(s):

I hereby appoint the following as my attorneys of record with full power of substitution and revocation to prosecute this application and to transact all business in the Patent and Trademark Office:

James A. Oliff, Reg. No. 27,075; William P. Berridge, Reg. No. 30,024;

Kirk M. Hudson, Reg. No. 27,562; Thomas J. Pardini, Reg. No. 30,411;

Edward P. Walker, Reg. No. 31,450; Robert A. Miller, Reg. No. 32,771;

Mario A. Costantino, Reg. No. 33,565; and Caroline D. Dennison, Reg. No. 34,494.

ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD BE SENT TO OLIFF & BERRIDGE, P.O. BOX 19928, ALEXANDRIA, VIRGINIA 22320, TELEPHONE (703) 836-6400.

I hereby declare that I have reviewed and understand the contents of this Declaration, and that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Typewritten Full Name
of Sole or First inventor:

Hiroshi

IIDA

Given Name

Middle Initial

Family Name

**Inventor's Signature:

Hiroshi Iida

**Date of Signature:

2003.8.22

Month

Day

Year

Residence:

Kawasaki-shi

Kanagawa

Japan

City

State of Province

Country

Citizenship:

Japan

Post Office Address:

c/o Fuji Xerox Co., Ltd., 2-1, Sakado 3-chome,

(Insert complete mailing
address, including country)

Takatsu-ku, Kawasaki-shi, Kanagawa, Japan

*This form may be executed only when attached to the specification (including claims) at the end thereof if Box a. is checked.

**Note to Inventor: Please sign name exactly as it appears above and insert the actual date of signing.

IF THERE IS MORE THAN ONE INVENTOR USE PAGE 2 AND PLACE AN "X" HERE ☒

PAGE 2 OF U.S.A. DECLARATION FORM

Typewritten Full Name
of Second Joint inventor:

Tohru	MORI	
Given Name	Middle Initial	Family Name
<i>Tohru</i>		
<i>2003/8/22</i>		
Month	Day	Year
Kawasaki-shi	Kanagawa	Japan
City	State of Province	Country

**Inventor's Signature:

**Date of Signature:

Residence:

Citizenship:

Post Office Address:
(Insert Complete mailing
address, including country)

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Takatsu-ku, Kawasaki-shi, Kanagawa, Japan

Typewritten Full Name
of Third Joint inventor:

Kenji	KAWASE	
Given Name	Middle Initial	Family Name
<i>Kenji Kawase</i>		
<i>Aug 22th 2003</i>		
Month	Day	Year
Kawasaki-shi	Kanagawa	Japan
City	State of Province	Country

**Inventor's Signature:

**Date of Signature:

Residence:

Citizenship:

Post Office Address:
(Insert Complete mailing
address, including country)

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Takatsu-ku, Kawasaki-shi, Kanagawa, Japan

Typewritten Full Name
of Fourth Joint inventor:

Hiroomi	ICHIBA	
Given Name	Middle Initial	Family Name
<i>Hiroomi Ichiba</i>		
<i>Aug 22th 2003</i>		
Month	Day	Year
Kawasaki-shi	Kanagawa	Japan
City	State of Province	Country

**Inventor's Signature:

**Date of Signature:

Residence:

Citizenship:

Post Office Address:
(Insert Complete mailing
address, including country)

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Takatsu-ku, Kawasaki-shi, Kanagawa, Japan

Typewritten Full Name
of Fifth Joint inventor:

Satoshi	KAITO	
Given Name	Middle Initial	Family Name
<i>Satoshi</i>		
<i>8/22/2003</i>		
Month	Day	Year
Kawasaki-shi	Kanagawa	Japan
City	State of Province	Country

**Inventor's Signature:

**Date of Signature:

Residence:

Citizenship:

Post Office Address:
(Insert Complete mailing
address, including country)

c/o Fuji Xerox Co., Ltd., 2-1, Sakado 3-chome,
Takatsu-ku, Kawasaki-shi, Kanagawa, Japan

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PAGE 3 OF U.S.A. DECLARATION FORM

Typewritten Full Name
of Sixth Joint inventor:

Reiko AOYAMA
Given Name Middle Initial Family Name

**Inventor's Signature:

Reiko Aoyama

**Date of Signature:

8/22/2003
Month Day Year

Residence:

Kawasaki-shi Kanagawa Japan
City State of Province Country

Citizenship:

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Post Office Address:

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Takatsu-ku, Kawasaki-shi, Kanagawa, Japan

Typewritten Full Name
of Seventh Joint inventor:

Noriyuki ABE
Given Name Middle Initial Family Name

**Inventor's Signature:

Noriyuki Abe

**Date of Signature:

8/22/2003
Month Day Year

Residence:

Kawasaki-shi Kanagawa Japan
City State of Province Country

Citizenship:

Japan

Post Office Address:

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address, including country)

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Takatsu-ku, Kawasaki-shi, Kanagawa, Japan

Typewritten Full Name
of Eighth Joint inventor:

Nobuyuki TAKAO
Given Name Middle Initial Family Name

**Inventor's Signature:

Nobuyuki NT 8/22/2003 Nobuyuki Takao

**Date of Signature:

8/22/2003
Month Day Year

Residence:

Kawasaki-shi Kanagawa Japan
City State of Province Country

Citizenship:

Japan

Post Office Address:

(Insert Complete mailing
address, including country)

c/o Fuji Xerox Co., Ltd., 2-1, Sakado 3-chome,
Takatsu-ku, Kawasaki-shi, Kanagawa, Japan

Typewritten Full Name
of Ninth Joint inventor:

Yumiko KOGA
Given Name Middle Initial Family Name

**Inventor's Signature:

Yumiko Koga

**Date of Signature:

8/22/2003
Month Day Year

Residence:

Kawasaki-shi Kanagawa Japan
City State of Province Country

Citizenship:

Japan

Post Office Address:

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address, including country)

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Takatsu-ku, Kawasaki-shi, Kanagawa, Japan

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PAGE 4 OF U.S.A. DECLARATION FORM

Typewritten Full Name
of Tenth Joint inventor:

Mitsushige

OGURI

**Inventor's Signature:

Given Name Middle Initial Family Name

**Date of Signature:

Mitsushige Oguri

8/22/2003

Month

Day

Year

Residence:

Kawasaki-shi

Kanagawa

Japan

City

State of Province

Country

Citizenship:

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Post Office Address:

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Typewritten Full Name
of Eleventh Joint inventor:

Takanobu

SUZUKI

**Inventor's Signature:

Given Name Middle Initial Family Name

**Date of Signature:

Takanobu Suzuki

8/25/2003

Month

Day

Year

Residence:

Kawasaki-shi

Kanagawa

Japan

City

State of Province

Country

Citizenship:

Japan

Post Office Address:

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c/o Fuji Xerox Co., Ltd., 430, Sakai, Nakai-machi,

Takatsu-ku, Kawasaki-shi, Kanagawa, Japan

Typewritten Full Name
of Twelfth Joint inventor:

Given Name Middle Initial Family Name

**Inventor's Signature:

**Date of Signature:

Month

Day

Year

Residence:

City

State of Province

Country

Citizenship:

Post Office Address:

(Insert Complete mailing
address, including country)

Typewritten Full Name
of Thirteenth Joint inventor:

Given Name Middle Initial Family Name

**Inventor's Signature:

**Date of Signature:

Month

Day

Year

Residence:

City

State of Province

Country

Citizenship:

Post Office Address:

(Insert Complete mailing
address, including country)

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